

ing paradigm based on the experimental design by members of the junior faculty workshop in the conflict management division at the 1995 academy of management meetings in Vancouver, BC. Variables included earning amount, deception frequency, real generosity and pretend generosity.

**Results** Using paired-samples T-test we showed that there were significant differences between two rounds in earning amount, deception frequency and real generosity. We administered separate one-way ANOVA with repeated measure on 4 different conditions (bank amounts). We found that, the main effect of condition was significant for real generosity (in both round), for pretend generosity (in first round) and for deception amount (in both round).

**Conclusions** We found that revelation (reputation concerns) decreases deception and increases generosity. Moreover, lesser magnitudes increase generosity and decrease deception and vice versa.

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#### EV0921

### Clinical profile of patients hospitalized for delirium

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**Introduction** Delirium is a common clinical syndrome characterized by acute disruption of all cognitive and behavioural functions.

**Objectives** – Draw up an epidemiological and clinical profile of patients hospitalised for delirium;

– Assess different pathologies involved.

**Methods** We conducted a retrospective and descriptive study, in the neurology department at Habib Bourguiba university hospital, Sfax, Tunisia, at the period from 2009 to 2013. We included 52 patients hospitalised for delirium. Socio-demographic and clinical data were collected from patient files.

**Results** The mean age was 66.5 years. The majority (73.1%) were elderly patients (>=60 years). Sex-ratio (M/F) was 1.73. It was the first episode in 96.2%.

Medical histories were cardiovascular in 55.8%, endocrinal in 25%, neurological in 11.5% and psychiatric in 13.5%. The beginning of the signs was brutal in 55.8% of cases. The reported symptoms were: disorientation in time and space (76.9%) and behaviour disturbance (63.5%), memory disorder (23.1%), headaches (26.9%) and hallucinations (17.3%). Organic etiologies were noted in 75% of cases: vascular 42.30%, metabolic 11.50%, infectious 11.5%, tumoral 3.9% and iatrogenic 3.8%. Delirium grafted on dementia was retained in 5.8% of cases.

**Conclusion** Delirium is associated with increased mortality. Its prevention is essential and requires recognition of risk situations.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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#### EV0922

### Hydrocephalus and psychiatric disorders: About a clinical case

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**Introduction** Hydrocephalus is a neurological disease caused by excessive accumulation of cerebrospinal fluid following an abnormal secretion, circulation and absorption. It is considered the most common reversible cause of dementia but still an underestimated cause of psychiatric disorders.

**Objectives** Highlighting the possible association of hydrocephalus in some psychiatric disorders and know how to adapt the management of this co-morbidity.

**Clinical Vignette** He is Mr O.Y, aged 27, unmarried, his parents divorced, lives with his mother. He had surgery in 2012 to the orthopedic service for disabling scoliosis. No significant psychiatric family history. Discovery of a tri ventricular hydrocephalus in 2011 requiring regular monitoring neurology.

Indeed Mr O.Y followed the CMP for a mood disorder requiring antidepressant treatment based. The evolution of disorder was marked by the installation of a hallucinatory and delusional syndrome motivating several hospitalizations and relapses iterative partial response to various therapies.

Mr O.Y was received a ventricular shunt within the sound hydrocephalus.

The postoperative course was marked a progressive amendment acoustic verbal hallucinations and delusions of persecution.

The conduct was to gradually reduce the dose of antipsychotic (Risperdal) to the stop. No recurrence pathological productions.

**Conclusions** Psychiatric disorders may mark the evolution of hydrocephalus. Share against the indications and side effects of some psychotropic drugs, the management of this co-morbidity may be difficult. Further studies are needed to better elucidate causality for this association and to develop appropriate therapeutic consensus.

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#### EV0923

### Alcohol consumption, smoking and substance use in first and final year of nursing school

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**Aims** To describe the use and abuse of alcohol, cigarettes and street drugs in nursing degree students of Alfredo Pinto nursing school at federal university of state of Rio de Janeiro.

**Methods** cross-sectional and descriptive data of first and final year students enrolled in a nursing degree course. One hundred and seventeen students took part in a questionnaire, providing sociodemographic information and completed the alcohol smoking and substance screening test (ASSIST). A double variant and chi-squared analysis and Fisher's exact test was performed.

**Results** One hundred and seventeen students participated. Of the first year students 82% (n=73) were woman; 61% (n=54); 18–20 years old; 43% (n=38) were white and 40% (n=36) had parents that identified as Roman-Catholic. The students in their last year: 89% (n=25) woman; 54% (n=15) aged between 21–23 years old; 70% (n=20) are white and 71% (n=20) have roman-catholic parents. That is a high prevalence of alcohol use: 84% (n=75) in the first year and 78% in the last year had used alcohol. 24% (n=21) had smoked during their first year and 18% (n=5) during the last year. It was found that the consumption of street drugs during early years of university is correlated to the age (P=0.033) and the religious orientation by parents (P=0.047).

**Conclusion** Universities responsibility towards their students, and students involvement with their learning process are factors that lead to changes in attitudes, beliefs and knowledge that are so